

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 18 20		OFFICE USE ONLY										
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received										
	Stephen			2016 APR 15 PM 4 RECEIVED AUSTIN CITY CLERK										
NICKNAME	LAST	SUFFIX	Date Hand-delivered or Date Postmarked											
4 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) _____ <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report		Receipt #	Amount \$	Date Processed								
5 ORIGINAL PERIOD COVERED		Month	Day	Year	Month	Day	Year	Date Imaged						
		1	/	1	/	2015	THROUGH	6	/	30	/	2015		

6 EXPLANATION OF CORRECTION

Correct expenditure and debt disclosures due to accounting mistake.
See next page for further explanation.

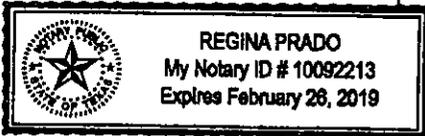
7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



Stephen Adler

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Stephen Adler, this the 15th day of April

2016, to certify which, witness my hand and seal of office.

Regina Prado

 Signature of officer administering oath

Regina Prado

 Printed name of officer administering oath

Notary

 Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
 Needed To Report And Explain Corrections**

Payables (primarily payroll taxes) disclosed on the debt reconciliation on the 1-15-15 report previously filed, were not picked up as expenditures when actually paid during this reporting period. Likewise, the loans made to the campaign by Steve Adler were not reflecting additional cash amounts he loaned to cover these expenditures. This amendment corrects the expenditures and loans from Steve Adler. The additional amount of the expenditures was \$41,237.94 (of which \$41,093.34 were payroll taxes), and the loan from Steve Adler increased by \$31,884.11.

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1. Filer ID (Ethics Commission Filers)	2. Total pages filed: 18	
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
Stephen		Adler		
4 CANDIDATE/ OFFICEHOLDER ADDRESS	ADDRESS /PO BOX:	APT/SUITE #	CITY	STATE: ZIP CODE
	301 W 2nd Street		Austin	TX 78701
<input type="checkbox"/> Change of Address				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
		(512) 978-2100		
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
Eugene		Sepulveda		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS:	APT/SUITE #	CITY	STATE: ZIP CODE
	3114 Wheeler Street		Austin	TX 78705
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
		(512) 970-9400		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach- COH-FR)			
10 PERIOD COVERED	Month	Day	Year	Month Day Year
		01	01	2015 THROUGH 06/30/2015
11 ELECTION	ELECTION DATE			ELECTION TYPE
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)
	Other Office: Mayor			
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

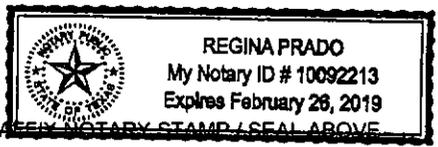
FORM C/OH COVER SHEET PG 2

14 C/OH NAME	Stephen Adler	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$0.00
	3	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$0.00
	4	TOTAL POLITICAL EXPENDITURES	\$72,315.26
	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$0.00
	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$449,200.00

18 AFFIDAVIT



REGINA PRADO
My Notary ID # 10092213
Expires February 26, 2019

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Stephen Adler

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Stephen Adler this the 15th day of April 2016 to certify which, witness my hand and seal of office.

Regina Prado

Signature of officer administering oath

Regina Prado

Printed name of officer administering oath

Notary

Title of officer administering oath

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

19. FILER NAME Stephen Adler	20. FILER ID (Ethics Commission Filers)
21. SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTALS AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$0.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$0.00
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
4. SCHEDULE E: LOANS	\$61,961.43
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$72,315.26
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0.00
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$0.00
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$0.00
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$0.00

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1. Total pages Schedule E: not available	
2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED LOANS		\$0.00	
5. Date of loan 01/07/2015	7. Name of lender Stephen I. Adler	<input type="checkbox"/> out-of-state PAC _____	
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 210 Lavaca St Apt 2605 Austin, TX 78701-4592		9. Loan Amount \$33,761.43
			10. Interest rate 0.00%
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Mayor		13 Employer (See Instructions) City of Austin	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; ZIP Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
5. Date of loan 01/20/2015	7. Name of lender Stephen I. Adler	<input type="checkbox"/> out-of-state PAC _____	
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 210 Lavaca St Apt 2605 Austin, TX 78701-4592		9. Loan Amount \$15,000.00
			10. Interest rate 0.00%
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Mayor		13 Employer (See Instructions) City of Austin	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; ZIP Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1. Total pages Schedule E: not available	
2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED LOANS		\$0.00	
5. Date of loan 01/30/2015	7. Name of lender Stephen I. Adler <input type="checkbox"/> out-of-state PAC _____	9. Loan Amount \$8,000.00	
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 210 Lavaca St Apt 2605 Austin, TX 78701-4592	10. Interest rate 0.00%	
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Mayor		13 Employer (See Instructions) City of Austin	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)	
	18 Guarantor address; City; State; ZIP Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
5. Date of loan 02/12/2015	7. Name of lender Stephen I. Adler <input type="checkbox"/> out-of-state PAC _____	9. Loan Amount \$1,500.00	
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 210 Lavaca St Apt 2605 Austin, TX 78701-4592	10. Interest rate 0.00%	
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Mayor		13 Employer (See Instructions) City of Austin	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)	
	18 Guarantor address; City; State; ZIP Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1. Total pages Schedule E: not available	
2. FILER NAME Stephen Adler		3. Filer ID (Ethics Commission Filers)	
4. TOTAL OF UNITEMIZED LOANS		\$0.00	
5. Date of loan 02/20/2015	7. Name of lender Stephen I. Adler	<input type="checkbox"/> out-of-state PAC _____	
6. Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 210 Lavaca St Apt 2605 Austin, TX 78701-4592		9. Loan Amount \$2,000.00
			10. Interest rate 0.00%
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Mayor		13 Employer (See Instructions) City of Austin	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; ZIP Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	
5. Date of loan 02/24/2015	7. Name of lender Stephen I. Adler	<input type="checkbox"/> out-of-state PAC _____	
6. Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8. Lender address; City; State; ZIP Code 210 Lavaca St Apt 2605 Austin, TX 78701-4592		9. Loan Amount \$1,700.00
			10. Interest rate 0.00%
		11. Maturity date	
12. Principal occupation / Job title (See Instructions) Mayor		13 Employer (See Instructions) City of Austin	
14. Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; ZIP Code		
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 01/02/2015	5 Payee name AT&T Mobility	
6 Amount \$55.15	7 Payee address; PO Box 6463 Carol Stream, IL 60197-6463	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/26/2015	5 Payee name AT&T Mobility	
6 Amount \$49.03	7 Payee address; PO Box 6463 Carol Stream, IL 60197-6463	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/24/2015	5 Payee name AT&T Mobility	
6 Amount \$42.49	7 Payee address; PO Box 6463 Carol Stream, IL 60197-6463	City; State: Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 02/24/2015	5 Payee name Barton Springs Center, Ltd.	
6 Amount \$531.79	7 Payee address; City: State: Zip Code 501 S Congress Ave Ste 400 Austin, TX 78704-1731	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 01/02/2015	5 Payee name David Buits	
6 Amount \$5,133.33	7 Payee address; City: State: Zip Code 1914 Patton Ln Austin, TX 78723-1236	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 01/02/2015	5 Payee name Conference Call Services	
6 Amount \$11.55	7 Payee address; City: State: Zip Code 425 E Colorado St Glendale, CA 91205-2560	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 02/24/2015	5 Payee name Edward M. Shack	
6 Amount \$1,560.00	7 Payee address; City; State: Zip Code 221 E 9th St Ste 202 Austin, TX 78701-2510	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/07/2015	5 Payee name Facebook	
6 Amount \$470.66	7 Payee address; City; State: Zip Code 1601 Willow Rd Menlo Park, CA 94025-1452	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/12/2015	5 Payee name Frost Bank	
6 Amount \$4.00	7 Payee address; City; State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 01/31/2015	5 Payee name Frost Bank	
6 Amount \$10.00	7 Payee address; City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 03/31/2015	5 Payee name Frost Bank	
6 Amount \$5.00	7 Payee address; City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 04/30/2015	5 Payee name Frost Bank	
6 Amount \$5.00	7 Payee address; City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 05/31/2015	5 Payee name Frost Bank	
6 Amount \$5.00	7 Payee address; City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 06/30/2015	5 Payee name Frost Bank	
6 Amount \$5.00	7 Payee address; City: State: Zip Code 2425 Exposition Blvd Austin, TX 78703-2270	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 02/19/2015	5 Payee name Gregoary A. Copp, Inc.	
6 Amount \$637.50	7 Payee address; City: State: Zip Code 1202 Nueces St Austin, TX 78701-1720	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 06/30/2015	5 Payee name Gregoary A. Copp, Inc.	
6 Amount \$568.75	7 Payee address; City; State: Zip Code 1202 Nueces St Austin, TX 78701-1720	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/15/2015	5 Payee name Laura N Hernandez	
6 Amount \$1,926.46	7 Payee address; City; State: Zip Code 2408 Manor Rd 108 Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/02/2015	5 Payee name Home Depot	
6 Amount \$51.90	7 Payee address; City; State: Zip Code 1200 Barbara Jordan Blvd Austin, TX 78723-2909	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 01/12/2015	5 Payee name Intuit Payroll	
6 Amount \$3.41	7 Payee address; City: State: Zip Code 2632 Marine Way 2632 Marine Way Mountain View, CA 94043-1126	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/19/2015	5 Payee name James McKinney	
6 Amount \$375.00	7 Payee address; City: State: Zip Code 6917 Langston Dr Austin, TX 78723-2219	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/07/2015	5 Payee name Christopher Michael	
6 Amount \$150.00	7 Payee address; City: State: Zip Code 4200 Deerk Dr. A Bastrop, TX 78602	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 01/02/2015	5 Payee name NGP VAN, INC	
6 Amount \$5,046.85	7 Payee address; City; State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 01/20/2015	5 Payee name NGP VAN, INC	
6 Amount \$2,100.00	7 Payee address; City; State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 02/02/2015	5 Payee name NGP VAN, INC	
6 Amount \$45.62	7 Payee address; City; State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 03/02/2015	5 Payee name NGP VAN, INC	
6 Amount \$3.96	7 Payee address; City; State: Zip Code 1101 15th St NW Ste 500 Washington, DC 20005-5006	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/07/2015	5 Payee name Progressive Waste Solutions of TX, Inc.	
6 Amount \$56.01	7 Payee address; City; State: Zip Code PO Box 17608 Austin, TX 78760-7608	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/27/2015	5 Payee name Source Spring LLC	
6 Amount \$10,000.00	7 Payee address; City; State: Zip Code PO Box 302917 Austin, TX 78703-0049	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 01/02/2015	5 Payee name SurveyMonkey	
6 Amount \$26.00	7 Payee address; City; State; Zip Code 101 Lytton Ave Palo Alto, CA 94301-1045	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 01/27/2015	5 Payee name Texas Workforce Commission	
6 Amount \$1,582.71	7 Payee address; City; State; Zip Code 101 E 15th St Rm 665 Austin, TX 78778-1442	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
4 Date 05/01/2015	5 Payee name Texas Workforce Commission	
6 Amount \$135.00	7 Payee address; City; State; Zip Code 101 E 15th St Rm 665 Austin, TX 78778-1442	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 03/12/2015	5 Payee name TODO Austin	
6 Amount \$290.00	7 Payee address; City: State: Zip Code 1400 Corona Dr Austin, TX 78723-2516	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/14/2015	5 Payee name United States Treasury	
6 Amount \$37,160.68	7 Payee address; City: State: Zip Code Eftps 1111 Constitution Ave Washington, DC 20224-0001	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 02/02/2015	5 Payee name United States Treasury	
6 Amount \$807.95	7 Payee address; City: State: Zip Code Eftps 1111 Constitution Ave Washington, DC 20224-0001	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Office Overhead/Rental	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Polling Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out of District
Credit Card Payment	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1. Total pages Schedule F1:	2. FILER NAME Stephen Adler	3. Filer ID (Ethics Commission Filers)
4 Date 02/17/2015	5 Payee name United States Treasury	
6 Amount \$1,407.00	7 Payee address; City: State: Zip Code Eftps 1111 Constitution Ave Washington, DC 20224-0001	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
4 Date 01/15/2015	5 Payee name Jim A Wick	
6 Amount \$2,052.46	7 Payee address; City: State: Zip Code 2611 Ektom Dr Apt D Austin, TX 78745-2629	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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